



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
United States Patent and Trademark Office  
Address: COMMISSIONER FOR PATENTS  
P.O. Box 1450  
Alexandria, Virginia 22313-1450  
www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 6774

|                             |                                       |              |                        |                               |
|-----------------------------|---------------------------------------|--------------|------------------------|-------------------------------|
| SERIAL NUMBER<br>10/773,178 | FILING DATE<br>02/09/2004<br><br>RULE | CLASS<br>347 | GROUP ART UNIT<br>2853 | ATTORNEY DOCKET NO.<br>118563 |
|-----------------------------|---------------------------------------|--------------|------------------------|-------------------------------|

## APPLICANTS

Yoshitsugu Morita, Nagoya-shi, JAPAN;

\*\* CONTINUING DATA \*\*\*\*\* *len*\*\* FOREIGN APPLICATIONS \*\*\*\*\* *len*

JAPAN 2003-065574 03/11/2003

JAPAN 2003-088178 03/27/2003

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 05/06/2004

|   |          |         |        |             |
|---|----------|---------|--------|-------------|
| Foreign Priority claimed<br><input checked="" type="checkbox"/> yes <input type="checkbox"/> no   | STATE OR | SHEETS  | TOTAL  | INDEPENDENT |
| 35 USC 119 (a-d) conditions met<br><input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance | COUNTRY  | DRAWING | CLAIMS | CLAIMS      |
| Verified and Acknowledged<br>Examiner's Signature <i>[Signature]</i> Initials <i>len</i>  | JAPAN    | 12      | 36     | 3           |

## ADDRESS

25944  
OLIFF & BERRIDGE, PLC  
P.O. BOX 19928  
ALEXANDRIA, VA  
22320

## TITLE

Ink detecting apparatus and ink package

|                                    |   |   |
|------------------------------------|---|---|
| FILING FEE<br><br>RECEIVED<br>1058 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |
|------------------------------------|---|---|